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## APPLICANTS

Tayib Sheriff, Cedar Park, TX;

Moinul H. Khan, Austin, TX;

\*\* CONTINUING DATA \*\*\*\*\* None HP 2/13/06

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None HP 2/13/06

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>H. Khan</i> Initials: <i>HP</i>	TX	3	30	4

## ADDRESS

21906  
 TROP PRUNER & HU, PC  
 8554 KATY FREEWAY  
 SUITE 100  
 HOUSTON, TX  
 77024

## TITLE

Control of multiply mapped memory locations

FILING FEE  RECEIVED 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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